

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND											
1 Date of Request: <u>06/23/07</u>		2 Serial/Patent # <u>09/746,491</u>									
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT							
	Filing			\$							
	Amendment			\$							
	Extension of Time			\$							
	Notice of Appeal/Appeal			\$							
X	Petition	11	02/07/05	\$ 690.00							
	Issue			\$							
	Cert of Correction/Terminal Disc.			\$							
	Maintenance			\$							
	Assignment			\$							
	Other			\$							
			7 TOTAL AMOUNT OF REFUND \$ 690.00								
10 REASON:		8 TO BE REFUNDED BY:									
	Overpayment	Treasury Check									
	Duplicate Payment	X Credit Deposit A/C #:									
X	No Fee Due (Explanation):	9 <table border="1" style="display: inline-table; text-align: center; width: 150px;"> <tr> <td style="width: 20px;">5</td> <td style="width: 20px;">0</td> <td style="width: 20px;">--</td> <td style="width: 20px;">0</td> <td style="width: 20px;">3</td> <td style="width: 20px;">1</td> <td style="width: 20px;">1</td> </tr> </table>			5	0	--	0	3	1	1
5	0	--	0	3	1	1					
Treated as a 1.181 petition, which requires no fee.											
11 REFUND REQUESTED BY:											
TYPED/PRINTED NAME: <u>Andrea Smith</u>		TITLE: <u>Petitions Examiner</u>									
SIGNATURE: <u>/Andrea Smith/</u>		PHONE: <u>2-3226</u>									
OFFICE: <u>Office of Petitions</u>											
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****											
APPROVED: <u></u>		DATE: <u>6/27/07</u>									

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

**Office of Finance
Refund Branch
Crystal Park One, Room 802B**